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RICHARD W. WILSON  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

✓

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

MICHAEL A AARON

Plaintiff,

vs.

Robert. Sillen, Et. al.,

Defendant.

C-08-00187 WHA

CASE NO. \_\_\_\_\_

**PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS**

I, Michael a. aaron, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_\_\_ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \_\_\_\_\_ Net: \_\_\_\_\_

Employer: \_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

- 9 a. Business, Profession or Yes \_\_\_ No ☒  
 10 self employment
- 11 b. Income from stocks, bonds, Yes \_\_\_ No ☒  
 12 or royalties?
- 13 c. Rent payments? Yes \_\_\_ No ☒  
 14 d. Pensions, annuities, or Yes \_\_\_ No ☒  
 15 life insurance payments?
- 16 e. Federal or State welfare payments, Yes \_\_\_ No ☒  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 \_\_\_\_\_  
 22 \_\_\_\_\_

23 3. Are you married? Yes \_\_\_ No ☒

24 Spouse's Full Name: \_\_\_\_\_

25 Spouse's Place of Employment: \_\_\_\_\_

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ \_\_\_\_\_ Net \$ \_\_\_\_\_

28 4. a. List amount you contribute to your spouse's support: \$ \_\_\_\_\_

1 b. List the persons other than your spouse who are dependent upon you for  
 2 support and indicate how much you contribute toward their support. (NOTE:  
 3 For minor children, list only their initials and ages. DO NOT INCLUDE  
 4 THEIR NAMES.).

5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 5. Do you own or are you buying a home? Yes \_\_\_\_ No ☒

8 Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

9 6. Do you own an automobile? Yes \_\_\_\_ No ☒

10 Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

11 Is it financed? Yes \_\_\_\_ No \_\_\_\_ If so, Total due: \$ \_\_\_\_\_

12 Monthly Payment: \$ \_\_\_\_\_

13 7. Do you have a bank account? Yes \_\_\_\_ No ☒ (Do not include account numbers.)

14 Name(s) and address(es) of bank: \_\_\_\_\_

15 \_\_\_\_\_

16 Present balance(s): \$ \_\_\_\_\_

17 Do you own any cash? Yes \_\_\_\_ No ☒ Amount: \$ \_\_\_\_\_

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19 market value.) Yes \_\_\_\_ No ☒

20 \_\_\_\_\_

21 8. What are your monthly expenses?

22 Rent: \$ \_\_\_\_\_ Utilities: \_\_\_\_\_

23 Food: \$ \_\_\_\_\_ Clothing: \_\_\_\_\_

24 Charge Accounts:

25	<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26	_____	\$ _____	\$ _____
27	_____	\$ _____	\$ _____
28	_____	\$ _____	\$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to  
2 whom they are payable. Do not include account numbers.)  
3 \_\_\_\_\_  
4 \_\_\_\_\_

5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_\_ No \_\_\_\_  
7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.  
9 \_\_\_\_\_  
10 \_\_\_\_\_

11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15  
16 1-28-08

17 DATE

Michael [Signature]

18 SIGNATURE OF APPLICANT  
19  
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RICHARD W. MCKINLEY  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA  
Case Number: C-0100187WHA

**CERTIFICATE OF FUNDS**


**IN**

**PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of MICHAEL ANTHONY AARON for the last six months  
San Quentin State Prison where (s)he is confined.  
[prisoner name]  
[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 98.66 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 98.66.

Dated: 1-25-08

  
[Authorized officer of the institution]



REPORT ID: TS3030 .701

REPORT DATE: 01/25/08  
PAGE NO: 1CALIFORNIA DEPARTMENT OF CORRECTIONS  
SAN QUENTIN PRISON  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUL. 25, 2007 THRU JAN. 25, 2008

ACCOUNT NUMBER : C80246 BED/CELL NUMBER: N 2 00000000095L  
ACCOUNT NAME : AARON, MICHAEL ANTHONY ACCOUNT TYPE: I  
PRIVILEGE GROUP: A

## TRUST ACCOUNT ACTIVITY

DATE	TRAN CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
07/25/2007		BEGINNING BALANCE					0.90
08/04	D554	INMATE PAYROL	0513JULY07		56.00		56.90
08/06	W536	COPAY CHARGE	0535/COPAY			5.00	51.90
08/13	FR01	CANTEEN RETUR	700608			0.25-	52.15
08/13	FC01	DRAW-FAC 1	0620/M2ND			52.15	0.00
09/07	D554	INMATE PAYROL	0909/AUG07		56.00		56.00
09/12	W535	DENTAL CHARGE	0986/COPAY			5.00	51.00
09/17	FC01	DRAW-FAC 1	1088/MAIN2			51.00	0.00
10/05	D554	INMATE PAYROL	1368SEPT07		56.00		56.00
10/10	W450	DONATION-VETE	1419FDSALE			51.00	5.00
10/15	FR01	CANTEEN RETUR	701491			0.40-	5.40
11/05	D340	EFT DEPOSIT	1787/J-PAY		50.00		55.40
11/06	D554	INMATE PAYROL	1824/OCT07		56.00		111.40
11/13	FC01	DRAW-FAC 1	1944/M2&3			110.00	1.40
12/06	D554	INMATE PAYROL	2245/NOV07		56.00		57.40
12/17	FR01	CANTEEN RETUR	702402			0.50-	57.90
12/17	FC01	DRAW-FAC 1	2407/M2ND			56.00	1.90
		ACTIVITY FOR 2008					
01/08	D554	INMATE PAYROL	2661/DEC07		56.00		57.90
01/14	FR01	CANTEEN RETUR	702763			0.30-	58.20
01/14	FC01	DRAW-FAC 1	2773/MAIN2			40.00	18.20
01/24	D340	EFT DEPOSIT	2886/JPAY		150.00		168.20

## TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.90	536.00	368.70	168.20	0.00	0.00

CURRENT  
AVAILABLE  
BALANCE

168.20

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THE WITHIN INSTRUMENT IS A CORRECT  
COPY OF THE TRUST ACCOUNT MAINTAINED  
BY THIS OFFICE.  
ATTEST: 1-25-08  
CALIFORNIA DEPARTMENT OF CORRECTIONS  
BY [Signature]  
TRUST OFFICE